



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE  
HEALTH AFFAIRS  
UNIT 10310  
APO AE 09316

TRICARE  
AREA OFFICE-  
EUROPE

16 June 2006

MEMORANDUM FOR See Distribution

SUBJECT: Clarification on TRICARE Coverage for Panniculectomy versus Abdominoplasty

1. It has come to the attention of TRICARE Area Office - Europe that host nation providers are recommending and patients are receiving an abdominoplasty in lieu of a panniculectomy.

a. In general, a panniculectomy (an excision of skin as well as superficial fat of the abdomen), may be considered a medically necessary procedure if there is evidence of excessive amount of superficial fat (pannus) that results in functional impairment or chronic irritation demonstrated by panniculitis or a dermatitis that is not amenable to more conservative treatment. In such cases, there must be clear evidence of medical necessity. Generally this procedure is approved for individuals who have lost a significant amount of weight (greater than 100 lbs) and now have a significant redundant skin and subcutaneous fat in the lower abdomen that overhangs the symphysis pubis.

b. An abdominoplasty is a surgical procedure (also known as a tummy tuck) that tightens lax anterior abdominal wall muscles and removes excess abdominal skin and fat. Diastasis recti (separation of the rectus muscle) is not considered a medical indication for this procedure. In general, an abdominoplasty is considered a cosmetic procedure and not medically necessary except as an alternative approach to repair ventral hernias existing concomitantly with significant anterior abdominal wall laxity and soft tissue excess.

2. In accordance with TRICARE Area Office-Europe Memorandum, Subject: Guidelines for Approval and Network Use for Cosmetic/Plastic and Morbid Obesity Surgeries in Host Nation Facilities, all patients requesting an abdominoplasty or panniculectomy were required to have concurrence by their Primary Care Manager and must obtain approval by TAO-E. A specific pre-approval form was developed to facilitate this process and was included in these guidelines. The enclosed revised form will now be used to help clarify the procedure. In addition, an educational sheet is now available and will be given to the beneficiary who inquires about obtaining a panniculectomy or abdominoplasty.

3. Any questions can be addressed to COL Kent L. Bradley, Medical Director, TAO-E at DSN 496-6309 or kent.bradley@europe.tricare.osd.mil.

ELIZABETH S. NIEMEYER  
CAPT, NC, USN  
Executive Director

Enclosures

1. Revised Pre-Approval Form
2. Beneficiary Education Sheet

Distribution:

ESC Members  
TEC Members

**TAO-Europe PCM Sheet for Panniculectomy**  
**Pre-Approval Referral Form**  
Date \_\_\_\_\_

Patient Name:
SSN:
Pt Email Address:
Pt phone #:
PCM email address:

**NOTE:** An **Abdominoplasty** is generally **considered a cosmetic** procedure. On rare occasions, abdominoplasty may be considered for coverage with determination of medical necessity. This usually is due to the presence of a true midline hernia. However, **TRICARE may cover a panniculectomy** to remove the overhanging pannus and excess skin if there is documented medical necessity.

Primary Care Manager must define the medical indication for surgery. Please check all that apply:

☐ Overhanging pannus below the symphysis pubis

**AND**

☐ Evidence of skin breakdown; skin rashes or intertrigo recalcitrant to conventional treatment for over 12 months

**AND**

☐ Evidence of greater than 100 lb weight loss (from peak weight to present) with stabilization of weight in the past 4 months. (the amount may be waived based on height and other considerations)

**AND IF Status Post Gastric Bypass Surgery:**

☐ At least 18 months from gastric bypass surgery, Date of Previous Surgery: \_\_\_\_\_

<b>Height:</b>	<b>Date of DEROS:</b>
<b>Current Weight:</b>	<b>Peak Weight:</b>
<b>Additional Information:</b>          	

\_\_\_\_\_  
**PCM Signature**

\_\_\_\_\_  
**Date**

***TSC Use Only*** (FAX Checklist to TAO-E ATTN: CASE MANAGER)  
496-6377 FAX or commercial 0049 (0) 6302-67-6377

If approved by TAO-E, the patient may then be referred to a host nation provider in the PPN for plastic surgery assessment. The Host Nation Provider pre-surgical assessment must be sent to TAO-E Case Manager as noted above. Any photographs will also be sent to the Case Manager. If approved, the TAO-E Case Manager will complete a written approval form and notify the servicing TSC that the surgery may be performed.



# FACT SHEET

For more information, contact the TRICARE Europe Clinical Operations Office at

**49-(0)6302-67-6336 or 6362**

## Panniculectomy & ‘Tummy Tucks’ *what you need to know*

### SUMMARY:

Panniculectomy—a surgical procedure to remove excess abdominal skin, often related to substantial weight loss—may often be covered under TRICARE due to the risk of associated skin conditions.

Abdominoplasty, better known as a ‘tummy tuck’, involves tightening the abdominal muscles. Except in rare cases when it is deemed medically necessary—as in the case of a midline hernia—it is normally a cosmetic procedure not covered by TRICARE.

### DETAILS:

Panniculectomy is a surgical procedure to remove the large/long overlap of skin on the lower abdominal area, generally on individuals who have lost a substantial amount of weight and have a significant amount of overhanging skin and excess superficial fat. Without correcting this problem, there is a risk of developing chronic and persistent local skin conditions. Panniculectomy does not deal at all with abdominal muscles; it is simply the removal of excess fat and skin.

Abdominoplasty, commonly known as a tummy tuck, is a major surgical procedure for men and women generally in good shape and health but who have large fat deposits around their abdomen or an excess of loose skin. Abdominoplasty can reduce protruding abdominal fat but it does leave a lengthy, permanent, sometimes visible scar that runs the length of the hipbones. Most people who undergo abdominoplasty are women who don’t intend to bear more children whose previous pregnancies stretched their abdominal muscles, or people suffering from obesity whose skin elasticity has diminished. Depending upon the amount of excess fat and skin a patient has and the area of the excess, different types of abdominoplasty procedures can be performed.

Abdominoplasty is generally considered a cosmetic procedure and only rarely is it viewed as a medically necessary procedure. TRICARE, like most other health insurance plans, does not reimburse for this procedure unless there is documented necessity which usually requires the presence of a hernia in the midline (known as a ventral hernia).

### WHAT TO DO:

Schedule an appointment with your Primary Care Manager (PCM), who will conduct a physical exam to assess the need for a panniculectomy, or in rare cases, an abdominoplasty. If either of these procedures are deemed potentially advisable, TRICARE Area Office-Europe will conduct a second review for approval to be seen by a host nation plastic surgeon. After reviewing the plastic surgeon’s assessment, TAO-E will make the final determination on approval for surgery.